

Emergency Fueling Operations Transaction Log

Date portable pump was utilized:_____ Agent responsible for utilization:_____

Agent responsible for dispensing fuel:_____

***Note: Enter the Beginning and Ending Meter Reading if the LED Display does not return to zero**

Date	Time	Operator's Name	Vehicle License #	GasCard # (last 6 digits)	PIN #	Beginning Meter (Dispenser)	Ending Meter (Dispenser)	Gallons Received	Signature

Send all pages of transaction logs to:

Division of Fleet Operations/State Fuel Network
447 West 13800 South
Draper, UT 84020
attn: Jeff Done